



**Metropolitan Government of Nashville & Davidson County  
Division of Unclaimed Property**

P.O. Box 196300

Nashville, TN 37219-6300

Phone: 615-862-6100, option 5

Email: [unclaimed.property@nashville.gov](mailto:unclaimed.property@nashville.gov)

Website: [www.nashville.gov/Finance/Unclaimed-Property.aspx](http://www.nashville.gov/Finance/Unclaimed-Property.aspx)

***Unclaimed Property Claim Form***

This form must be signed and notarized. This form is not considered submitted until all documentation required, as stated below, has been received by the Unclaimed Property Office. Please mail this form and documentation to the P.O. Box above, **before March 22, 2013**. Any forms received after this date will not be processed. All unclaimed funds not processed by March 2013 will be remitted to the State of Tennessee Unclaimed Property Office.

**Please provide the following information exactly as it appeared on the letter you received from the Division of Unclaimed Property.**

Unclaimed Property Tracking #

(From the contact letter, please enter one number per box)

\_\_\_\_\_  
Name (Last Name, First Name MI or business name)

\_\_\_\_\_  
Social Security #/Tax ID #

\_\_\_\_/\_\_\_\_/\_\_\_\_  
DOB(mm/dd/yyyy), if applicable

\_\_\_\_ C-Corporate Entity

\_\_\_\_ N-Non-Corporate Entity

\_\_\_\_ P-Individual

\_\_\_\_\_  
Address

\_\_\_\_\_  
Apt #

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip Code

☐

Please check if address above is not your current address, and enter your current address below.

\_\_\_\_\_  
Address

\_\_\_\_\_  
Apt #

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip Code

**Contact Information**

Please provide information below in case the Division of Unclaimed Property should need to contact you.

Home Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_

Other Phone \_\_\_\_\_

Email Address \_\_\_\_\_

## CERTIFICATION AND NOTARIZATION REQUIRED

I hereby certify that all the facts and information that I have provided are true and accurate. I have a legal or equitable interest in the unclaimed funds and will indemnify and save harmless the Metropolitan Government of Nashville & Davidson County, its officers, employees and agencies from any valid claim to such unclaimed funds.

Signature of Claimant \_\_\_\_\_ Date \_\_\_\_\_

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_.

Notary \_\_\_\_\_

Notary Seal

My commission expires: \_\_\_\_\_

## DOCUMENTATION REQUIRED BEFORE CLAIMS ARE PAID

### Individuals:

- Proof of mailing address
- Copy of Social Security Card or Proof of Social Security Number
- Copy of drivers license, state-issued identification card, or passport
- Proof of legal or equitable interest (authority to claim property) if you are not the individual listed (death certificate, probated will, power of attorney, etc.)

### Businesses:

- Proof of mailing address
- Proof of FEIN (Federal Tax ID Number)
- Copy of ID on claimant signing claim form
- Documentation that claimant has authority to claim for the business
- Copy of ownership interest via contract or other legal documents if claiming for closed or sold businesses

### All Claimants:

If you are requesting that the address above be changed, you must provide a copy of the identification above and a copy of a bill or other proof of the validity of the address listed.

\*\*\*Please note: The check will be sent in the name of the person or business listed on this form.

If you have any questions about completing this form, you may write to the address above, call the phone number above, or email the Division of Unclaimed Property at the e-mail address above.

### For Government Use Only:

Received: \_\_\_\_\_

ID \_\_\_\_\_

AB \_\_\_\_\_

Appr1 \_\_\_\_\_